Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	8/23/14	Street:	475 East S/O 375 North	
Incident #:	14ISPC007190	Apt, Lot, Room #:		
County:	Kosciusko	City:	Warsaw	
Type of Laboratory Seizure (check one) Seizure Loc			on (check all that apply)	
☑ Lab Seizure☐ Chemical Seizure☐ Equipment Seizure☐ Dumpsite Seizure		Residence Outbuilding Vehicle Other:	Business	
Apt., hotel, multi-family dwelling: Shared HVAC: Yes No Unknown				
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)				
 ☑ One Pot or Birch Reaction(s): open air ☐ Red Phosphorous/Iodine Reaction(s): ☑ Hydrochloric Acid Gas Generator(s): open air ☑ Flammable Solvents: open air ☑ Water Reactive Metal (Lithium): open air 		Corros	 Anhydrous Ammonia: open air Corrosive Acid: open air Corrosive Base: Ammonium Nitrate/Sulfate: Other (item and location): 	
Child under age 18 discovered (check appropriate)				
☐ Yes (number present) ☐ No ☐ Children not present but evidence they reside or visit often		Living conditions of home: clean disarray unclean Estimated length of time manufacturing had been occurring: Additional Information:		
Vehicle, Travel Trailer, RV or Watercraft Information:				
Owner: VIN: Year:		Make: Model: Color:		
This report has been faxed* or emailed to the following agencies that serve the location:				
1			firebase@yahoo.com axter@kcgov.com Fax: 317-234-7595 or 317-234-7596	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Luke Waikel</u> Phone <u>574-546-4900</u>				

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.